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30560 7590 05/04/2004

**MAXYGEN, INC.  
INTELLECTUAL PROPERTY DEPARTMENT  
515 GALVESTON DRIVE  
RED WOOD CITY, CA 94063**



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<u>Diane D. Dunn</u>	(Depositor's name)
<u>Diane Dunn</u>	(Signature)
<u>7/26/04</u>	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/782,587	02/12/2001	Anders Hjelholt Pedersen	0212US310	9481

TITLE OF INVENTION: FACTOR VII OR VIIA-LIKE MOLECULES

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	08/04/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
TELLER, ROY R	1654	435-069100

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Joanne R. Petithory  
2. Norman J. Kruse  
3. \_\_\_\_\_

## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Maxygen Aps  
Maxygen Holdings Ltd.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Hoersholm, Denmark  
Grand Cayman, Cayman Islands

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

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(Authorized Signature) Joanne R. Petithory (Date) 7/26/04

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01 FC:1501 1330.00 DA  
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